Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>06/08/2008</u>	Address:	1150 F. 600 N.
Case #:	<u>13-73209</u>		Knox, IN 46534
County:	Starke/75		
Type of Laboratory Scizure (check one) Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)		Seizure Location (c Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open - No Structure Other;
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Animonia Reaction(s);			
Red Phosphorous/Iodine Reaction(s):			
☐ Flammable Sofyents:			
Water Reactive Motal (Lithium):			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
☐ Yes Ev ☑ No	er age 18 discovered (check one) ridence of children (number present) port to Child Protective Services	Ephedrine/Pseud	<u>e Information</u> oephedrine Tracking Log erchant Tip
This report is to be faxed to the following agencies that serve the location:			
Fire Departs	ment: Knox Co.	Fax: <u>574-5</u>	8 <u>6-2288</u>
Health Depa	artment: Starke Co.	Fax: <u>574-7</u>	<u>72-8035</u>
Child Prote	ction Service: Starke CPS	Fax: <u>574-7</u>	<u>72-3837</u>
For further information regarding this methamphetamine laboratory, contact Investigating Officer: R. Hudson Phone 219-696-6242			

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention,

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.